## APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEMS AND METHODS FOR IN SITU SETTING CHARGE VOLTAGES IN A DUAL RECHARGE SYSTEM

		n the specification:								
Check		шt. 11 г								
	*a. 🛭 a b. 🗍 f	attached hereto.	iantian No	and amended on	C.F 11 . \					
	I hereby state t	hat I have reviewed and und	leastand the content	s of the above-identified specifica	(if applicable).					
claims	s, as amended by a	ny amendment referred to a	bove.	s of the above-identified specifica	non, including the					
I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed:										
The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):										
this ap	I hereby appoir oplication and to tr	nt the following as my attorn ansact all business in the Pa	neys of record with a stent Office:	full power of substitution and revo	ocation to prosecute					
herein that the imprise	Edwa Marie Joel S. An Eri Ronald Elizal  CORRESPONDE RIDGE, PLC, P.C  I hereby declare of my own knowle ese statements wer onment, or both, u	ard P. Walker, Registration of A. Costantino, Registration No Richard E. Rice, Registratic D. Morehouse, Registratic D. Morehouse, Registration of F. Chapuran, Registration beth F. Harasek, Registratic and/or Eugen ENCE IN CONNECTION D. BOX 19928, ALEXAND ethat I have reviewed and usedge are true and that all state made with the knowledge nder Section 1001 of Title 1	No. 31,450; Robertion No. 33,565; Ste. 36,430; Christopion No. 31,560; Pauton No. 38,565; Mar No. 26,402; Richar On No. 28,850; Kevie O. Palazzo, Regis WITH THIS APIORIA, VIRGINIA anderstand the contest tements made on in that willful false single of the United Sta	s J. Pardini, Registration No. 30,4 A. Miller, Registration No. 32, phen J. Roe, Registration No. 34, her W. Brown, Registration No. 37,956; k Costello, Registration No. 37,956; k Costello, Registration No. 31,34 d B. Domingo, Registration No. 32, tration No. 20,881.  PLICATION SHOULD BE SER 22320, TELEPHONE (703) 836 ents of this Declaration, and that a afformation and belief are believed tatements and the like so made are tes Code and that such willful false	771; 463; 38,025; 2; 6,784; 145; NT TO OLIFF & 6-6400.  Il statements made to be true; and further e punishable by fine or					
jeoparo	dize the validity of	the application or any pater	nt issued thereon.							
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_			Given Name	Middle Initial	Family Name					
2	**INVENTOR	'S SIGNATURE:	for							
3	**DATE OF SIGNATURE:		6/10/03							
B			Month	Day	Year					
	Residence:	Penfield		New York	USA					
	Citizenship:	City USA		State or Province	Country					
	Citizensinp.	Post Office Address:								
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		including country)	Penfield, NY 14	526						
*This	form may be exec	cuted only when attached t	to the specification	(including claims) at the end th	ereof if Box a. is					

\*\*Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

checked.

## Page 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

1	Typewritten Full Name						
	of Second Joi	nt Inventor (if any)	John	M.	SCHARR		
			Given Name	Middle Initia	Family Name		
2	**INVENTO	R'S SIGNATURE:	75km 8/1.	Hokar			
3	**DATE OF	SIGNATURE:	Juno	' ' <i>i3</i>	. 2003		
	<u> </u>		Month	Day	Year		
	Residence:	Canandaigua	New Y	/ork	USA		
	residence.	City	State or Province		Country		
	Citizenship:	USA		TO VINCO	Country		
		Post Office Address: (Insert complete	177 Chapel Street				
		mailing address, including country)	Canandaigua, NY 14420	)			
1	Typewritten Full Name						
	of Third Joint Inventor (if any)		Mark	A.	SCHEUER		
			Given Name	Middle Initial	Family Name		
2	**INVENTO	R'S SIGNATURE:	Mark O.S.	here	· · · · · · · · · · · · · · · · · · ·		
3	**DATE OF	SIGNATURE:	June	10	2003		
			Month	Day	Year		
	Residence:	Williamson	New Y	•	USA		
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	Citizenship: USA Post Office Address: (Insert complete		State of F.	Tovince	Country		
			3760 Ridge Road				
		mailing address, including country)	Williamson, NY 14589				
1	Typewritten F	_ ,,	Williamson, NT 14369	***			
-		nt Inventor (if any)	Patricia	J.	DONALDSON		
	- <b>,</b>		Given Name	Middle Initial	Family Name		
2	**INVFNTO	D'S SICNATIIDE.	D+: in 1		Turiniy Tvarice		
	**INVENTOR'S SIGNATURE:  **DATE OF SIGNATURE:		Tanuaa /	Tonasasan			
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			Month	Day	Year		
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	City Citizenship: USA		State or Province		Country		
	<b>.</b>	Post Office Address: (Insert complete	1248 Marsh Road				
		mailing address, including country)	Pittsford, NY 14534				
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4427		including country)					

<sup>\*\*</sup>Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.